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MENTAL DISABILITIES BOARD OF VISITORS

TO

THE FORTY SEVENTH MONTANA

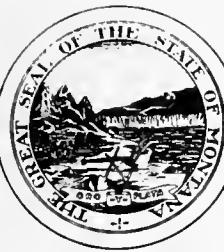
LEGISLATURE

January 1981

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OFFICE OF THE GOVERNOR
MENTAL DISABILITIES BOARD OF VISITORS



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STATE OF MONTANA

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March 11, 1981

Members of the Forty-Seventh Legislature

This report to the Forty-Seventh Montana Legislature summarizes the site reviews conducted by the Mental Disabilities Board of Visitors. This report is issued in accordance with Sections 53-20-104 (8) and 53-21-104 (8) of the Montana Codes Annotated.

The Mental Disabilities Board of Visitors is charged by Montana Law with reviewing patient care at Montana's community mental health centers, as well as the institutions for the mentally ill and the developmentally disabled. In addition to the site reviews, the Board has responded to more than two hundred requests of patients and families to review the care, treatment, and protection of rights of emotionally ill and developmentally disabled citizens of the State of Montana [53-20-104(6) and 53-21-104(5) M.C.A.].

This report to the Legislature serves to highlight the major accomplishments and deficiencies of the facilities reviewed by the Board of Visitors. The Board is hopeful that these findings will continue to strengthen the delivery of treatment services to Montana citizens. If more information is desired on any of the matters discussed in this annual report, please contact our office, or refer to the individual reports which are on file in the Governor's Office.

Respectfully submitted,

A handwritten signature in black ink that reads "Allen V. Bertelsen".

Allen V. Bertelsen
Chairman

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REPORT TO THE
FORTY-SEVENTH MONTANA LEGISLATURE

In reviewing the facilities under our purview, the Board of Visitors has documented the compliance and non-compliance of these facilities with Montana Law. Our annual report highlights the deficiencies (as required by law), as well as the areas in which excellent service has been rendered.

TREATMENT SERVICES [53-20-101, 53-20-104, 53-20-148,
53-21-101, 53-21-104, 53-21-162 M.C.A.]

Accomplishments:

The Board of Visitors continues to support the concept of the Pre-release unit at Warm Springs State Hospital. Coordinated discharge planning is essential for successful community placement.

The establishment of the RITZ program (Residential Intermediate Treatment Zone) by the Region II Mental Health Center (Great Falls) occurred during Fiscal Year 1980. This community based program was established to serve teen-agers.

The Cluster Program is a cooperative program of the Butte Mental Health Center (Region IV) and Warm Springs State Hospital. The purpose of this program is to prepare groups of chronic mental clients to live successfully within the community. This program is designed to enhance the quality of life for many people who would otherwise be institutionalized for long periods of time.

The Board of Visitors applauds the efforts of the Region V Mental Health transitional living program in Stevensville. The Genesis House program is unique in that it was created, organized and is managed by the local citizens.

The Silver Street Kitchen of the Butte Mental Health Center (Region IV) and the New Directions Center of the Great Falls Mental Health Center (Region II) offer excellent day treatment services. Job training, counseling and employment are examples of the services provided for clients upon their return from the institution.

The model of care and treatment offered to the developmentally disabled residents by Eastmont Human Services Center is exemplary.

Deficiencies:

There is need for another group living facility within Region IV. With the high concentration of mentally ill clients in the region such a facility would enhance existing mental health services. In addition, there is need for a twenty-four hour group home in Region II.

There is no clearly defined role for the Center for the Aged. The Center serves psychiatric patients as well as residents with stabilized illness such as organic brain syndrome and senility.

The Board of Visitors has long supported the concept of an intensive treatment unit to address the needs of the schizophrenic patient. With the reorganization at Warm Springs State Hospital, the intensive quality of care once provided by this unit was changed. Recidivism studies with this type of patient in Montana indicate the need for such a treatment unit.

RECORD KEEPING [53-20-161, 53-21-162 and 53-21-165 M.C.A.]

Accomplishments:

Improvements have been made in the record keeping systems at Eastmont Human Services Center, the Center for the Aged and Boulder River School and Hospital. The Board of Visitors is pleased with improvements in the area of medical records and individual habilitation plans.

Region II (Great Falls), Region III (Billings) and Region V (Missoula) have implemented new record keeping systems or revised existing systems within their respective centers. This positive step will improve patient care.

Referral information and discharge summaries from Warm Springs State Hospital to the mental health centers has improved over the biennium. In order for mental health professionals to provide continuity in treatment, this information is essential.

Deficiencies:

Treatment objectives at Warm Springs State Hospital were too frequently vague, abstract and general. Discrepancies were noted between the admission diagnosis and the diagnosis by the treatment unit. In other cases, the treatment plan was not relevant to the patients' reason for admission.

The nursing care plans at Galen State Hospital were not dated and frequently were vague. In addition, very few files contained individual treatment plans.

Often treatment plans were incomplete in the mental health centers reviewed in Region II (Great Falls), Region IV (Helena) and Region V (Missoula). It is the hope of the Board of Visitors that this deficiency will be addressed by the new or revised record keeping systems which are being implemented in each of these regions.

There was little, if any, documentation regarding the reason for the use of restraints and the quiet room at the Center for the Aged. In addition, the policies and procedures of the facility regarding the use of restraints was not being followed.

ENVIRONMENTAL [53-20-104(4) and 53-21-104 (3) M.C.A.]

Concerns regarding the physical conditions of the Boulton Building at Warm Springs State Hospital and cottages three and five at Boulder River School and Hospital were noted in past reports of the Board of Visitors. These buildings have been closed or demolished.

The addition of an enclosed patio area at the Center for the Aged and a fenced area at Galen State Hospital afford the patients access to the out-of-doors, without supervisory staff.

Improvements made in the psychiatric room at the hospital in Miles City (Region I) are very good. The room has been remodeled to provide security, as well as offer protection to patients in need of such care.

Deficiencies:

Better maintenance of the grounds at Boulder River School and Hospital is needed. Little, if any, grass exists around cottages ten through fifteen. The Board of Visitors expressed concern for the residents who were observed sitting in the dirt.

Several of the cottages (including the bath and shower areas), the educational classrooms and the food preparation area at Boulder River School and Hospital need paint and improved maintenance. This also holds true for the Minimum Security Building (Unit 85 and Unit 86) and the Warren Building at Warm Springs State Hospital.

The dormitory and bathing areas of the Children's unit at Warm Springs State Hospital offers little, if any, privacy for the residents. Likewise, the cells in the Maximum Security Unit at Warm Springs State Hospital offer no therapeutic value or privacy for the patients.

The smell of urine in the corridor of Crockett I at

Galen State Hospital is overwhelming. In spite of the efforts of the maintenance staff this problem cannot be eliminated because of the existing floor tile which has receded.

The air conditioning and ventilation systems of the Receiving Hospital at Warm Springs State Hospital (Wards A, B, C, D) does not function properly.

CONSUMER ISSUES [53-20-104 and 53-21-104 M.C.A.]

Accomplishments:

Regions I (Miles City) and III (Billings) have developed grievance procedures for clients regarding their rights and the services they are or are not receiving. The Board of Visitors is encouraged by these actions and urges all mental health regions to develop such procedures.

Consumer satisfaction data available from the mental health centers indicates most persons surveyed were satisfied with the treatment they received and felt somewhat better about their problems.

Deficiencies:

Reviews of Region II (Great Falls), Region III (Billings), Region IV (Helena) and Region V (Missoula) indicate there is no documentation of time between the first contact of a client and the actual intake session. This data would keep administrators informed of staffing needs, as well as provide information valuable in long-range planning.

There is a waiting list of approximately thirty children in the community who are in need of some form of intensive residential treatment. In addition, the administration of the Region III Mental Health Center (Billings) noted there is presently a waiting list for adults and children in need of out-patient counseling.

The present use of "seclusion" and "time out" at Galen State Hospital and Units 85 and 86 of Warm Springs State Hospital is not effective. Additional training for the staff is needed in order to use these methods more effectively.

Additional adaptive equipment and revisions required to prevent continued contractures, deformity and discomfort is badly needed at Boulder River School and Hospital.

Although some food and personal care items can be purchased at the Center for the Aged, the addition of a canteen would be of benefit to the residents. Galen State Hospital would also benefit from the addition of a canteen for the residents.

ADMISSIONS - PLACEMENTS [53-20-101 (3), 53-20-121, 53-20-127
53-21-1-1 (3), 53-21-162 (2)M.C.A.]

Accomplishments:

The Board of Visitors is encouraged with the progress made in placing developmentally disabled persons from Warm Springs State Hospital into appropriate community based programs.

Admission screening procedures have been developed at the Center for the Aged. These procedures should assist the Center's acceptance of only those persons who could be appropriately treated.

Deficiencies:

An increase in court commitments to Warm Springs State Hospital of patients with physical problems rather than psychiatric disabilities has created a need for physical rehabilitation programs, which Warm Springs is ill equipped to address.

As reported in the last annual report of the Board of Visitors there continues to be a high percentage of residents who do not have the proper commitment papers to Boulder River School and Hospital. One hundred fourteen residents had expired court orders or no court orders at all.

The need for more community based treatment programs for emotionally disturbed children and developmentally disabled individuals continues.

ADMINISTRATIVE - STAFF

Accomplishments:

The Western Montana Regional Community Mental Health Center (Region V, Missoula) holds the distinction of providing full time mental health services to each county within its catchment area.

The addition of a Clinical Director at Boulder River School and Hospital is positive. As a result, procedures have been established for the necessary lab tests, as well as monthly and quarterly reviews of medication.

The use of the volunteer case manager system at the South Central Montana Regional Mental Health Center (Region III, Billings), is an exemplary model for other centers in their treatment of chronic mental patients.

The addition of a Masters degree Social Worker and a Medical Records person at the Center for the Aged had been very beneficial to the operations of the facility, as well as for the residents.

Deficiencies:

With the wide variety of patients at Galen State Hospital (elderly, psychiatric, acute medical, developmentally disabled, and alcohol and drug abusers), there is a need for more developmental services staff. For example, a recreation therapist, occupational therapist, and a physical therapist would be of benefit to the residents.

The current understaffing of the physical and occupational therapy departments at Boulder River School and Hospital significantly limits the availability of developmental services needed by the residents. Forty to sixty percent of the residents, whose needs were identified and documented in the individual habilitation plan are not being provided services by those two departments.

The increased percentage of acute psychiatric admissions to Warm Springs State Hospital may warrant an increase in program development. When the scope of patient treatment and activities are limited because there is not enough staff, admission time may be increased unnecessarily.

The Board of Visitors shares the concerns of mental health professionals regarding the lack of psychiatrists available throughout the state. There are presently psychiatrist vacancies in Region I (Miles City), Region V (Missoula) and at Warm Springs State Hospital.

APPENDIX A

GRIEVANCE STATISTICS

MENTAL DISABILITIES BOARD OF VISITORS

GRIEVANCE STATISTICS¹

<u>Fiscal Year 1979</u>		<u>Fiscal Year 1980</u>		<u>Fiscal Year 1981 (through December 31, 1980)</u>	
Source of Referral:	Source of Referral:	Source of Referral:	Source of Referral:	Source of Referral:	Source of Referral:
Warm Springs	29	Warm Springs	52	Warm Springs	36
Boulder	10	Boulder	17	Galen	2
Mental Health	2	Mental Health	8	Eastmont	1
Legal Agencies	3	Legal Agencies	5	Mental Health	9
Parents/Family	7	Parents/Family	10	Legal Agencies	9
		Citizen Advocate (Governor's Office)	2	Parents/Family	23
		Other Agencies ²	7	Citizen Advocate (Governor's Office)	3
				Other Agencies	14
Total	51	Total	101	Total	110
Average/month	4.2	Average/month	8.4	Average/month (6 months)	18.3
		Percent Increase from FY 79	100%	Percent Increase from FY 80	117%
				Percent Increase from FY 79	336%
Formal Action ³	5	Formal Action	8	Formal Action	14
Informal Action	46	Informal Action	93	Informal Action	96
-	-	-	-	-	-
-	-	-	-	-	-
-	-	-	-	-	-

¹See sections 53-20-104 (6) and 53-21-104 (5) Montana Codes Annotated

²Other agencies include but are not limited to the Human Rights Commission and DO/Montana Advocacy Program

³Formal Action involves court action, and/or taking the grievances to the superintendent of a facility; the director of a mental health center or to the Department of Institutions. Informal action is defined as resolving the issue with the unit supervisor, cottage supervisor or other on-line staff.

MENTAL DISABILITIES BOARD OF VISITORS

Examples of Grievances

1. A young woman at Warm Springs was denied visitation and phone privileges. She felt that this was a violation of her rights and she contacted the Board of Visitors. The Board, after investigating this case, contacted the Unit Supervisor, and a contractual arrangement was made with the patient and the Hospital. These privileges were reinstated.
2. A patient of a mental health facility was forced to sign a contract with the facility. The contract listed twenty-eight items which the patient would not do; violation of one of the components and the client would "be put in the seclusion room without exception." The patient violated the contract and was placed in leather restraints for three days in his room. The facility violated the terms of their own contract (which was not dated or signed by any supervisors or administration.) The Board, in responding to this grievance, talked with the Superintendent of the facility, and it was decided, in the best of the patient to transfer him to a different environment. The patient has had no other incidents.
3. A client of a mental health center contacted the Board regarding her treatment plan. The mental health center was recommending that a client go to Warm Springs State Hospital. The client did not feel that this was needed. The mental health center requested that the county attorney file papers requesting a hearing for commitment. The Judge ruled that the requested commitment was inappropriate. Consequently the person went back to the mental health center requesting out-patient counseling. The mental health center refused treatment because the person did not comply their original treatment plan, which was rejected by the Judge. The Board attempted to get the mental health center to provide services; they agreed on an emergency basis only. The Board further aided this client in finding alternative professional services.

